

Guidance on 297 OOOO VICAP Assessments in CSB Performance Contracts, CARS Reports, and CCS 3 Submissions

Item 297.OOOO of the 2011 Appropriation Act requires CSBs to conduct independent clinical assessments on children before they can access Medicaid community mental health rehabilitative services. DMAS and the VACSB have been working on how to implement this provision, named the Virginia Independent Clinical Assessment Project (VICAP). The VACSB Data Management Committee and the Department have developed the following guidance for CSBs to use in reflecting these VICAP assessments in performance contracts and in reporting on them through CCS 3 and CARS.

1. The CSB will open a case on each child for whom it will conduct the independent clinical assessment for Medicaid community mental health rehabilitation services, since the assessment is an Assessment and Evaluation (720) Service under Services Available Outside of a Program Area (400). The CSB will not admit the child to the Mental Health Program Area (100) unless it provides mental health services to the child in addition to the VICAP assessment. Opening a case means the CSB will collect the 35 data elements required for opening a case that are listed on page 41 of the CCS 3 Extract Specifications Version 7. In the assessment, if the clinician determines there is no diagnosis, he or she will enter V7109 (no diagnosis or condition Axis I/no diagnosis Axis II) rather than 99996 (not applicable) in the diagnosis data element. Entering not applicable is not appropriate since the child was assessed and no diagnosis was determined.
2. The CSB will conduct the assessment and document the assessment in the medical record and its information system.
3. The CSB will include a consumer record on each child assessed and a service record for the assessment in the month for which the CCS 3 extract is submitted. The service record will reflect all of the required data elements for receipt of Assessment and Evaluation Services (720), including the service hours received. The units of service will not be reported as Z consumer service hours since the child is known to the CSB and a case has been opened on the child; the units will be reported as service hours in data element 10.
4. Unless the child received services that require admission to a program area, the CSB will not include a TypeOfCare record in its monthly CCS 3 extract submission for the child because a TypeOfCare record is not required for Services Available Outside of a Program Area. Refer to pages 5, 8, 10-11, and 15 of the CCS 3 Extract Specifications. Consequently, because there is only a case opening but no admission to a program area or TypeOfCare record, there will be no admission date, discharge date, or discharge status reported through CCS 3 for the assessment.
5. The CSB will include the projected cost of these VICAP assessments on Form 01 Services Available Outside of a Program Area (SAOPA) (400) and the anticipated Medicaid reimbursement for them on page AF-3 in its performance contract and revised contract. The CSB will include the actual cost of these VICAP assessments on Form 01 Services Available Outside of a Program Area (SAOPA) (400) and the actual expense for the assessments and Medicaid reimbursement received for them on page AF-3 in its mid-year and end of the fiscal year CARS reports.

6. If a CSB contracts with another CSB or a private provider to conduct VICAP assessments **but bills DMAS for them**, the CSB contracting for the assessments will include the projected cost of the assessments on Form 01 and the anticipated Medicaid reimbursement for them on page AF-3 in its performance contract and revised contract. This CSB also will include its actual cost of these assessments on Form 01 and its actual expense for these assessments and the Medicaid reimbursement for them on page AF-3 of its mid-year and end of the year CARS reports. Finally, this CSB will include information about the children receiving these assessments and the associated service hours in its CCS 3 submissions.

The other CSB **actually providing the assessments** will include the anticipated contracted revenue for the assessments as Other Fees, but it will not include the projected cost for them on Form 01 (since the projected cost was shown by the contracting CSB), in its performance contract and revised contract. The other CSB actually providing the assessments will include the actual contracted revenue as Other Fees and the related expenditure on page AF-3 of its mid-year and end of the fiscal year CARS reports, but it will not include the actual cost for them on Form 01. In its CARS reports, this CSB will include an explanation on the Comments page (AF-2) to explain the resulting difference between the total expenditures on page AF-1 and the total costs on Forms 01 through 31 resulting from not including the actual contracted cost of the assessments on Form 01. Finally, this CSB will not include any information about the children receiving these contracted assessments and the associated service hours in its CCS 3 submissions, since the CSB contracting for the assessments will report this information.

7. If a CSB contracts with another CSB to conduct VICAP assessments **but does not bill DMAS for them**, the CSB contracting for the assessments will not include these assessments and the children that receive them in its CCS 3 or CARS submissions or its performance contract. The other CSB that conducts the assessments and bills DMAS for them will include the assessments and the children that receive them in its CCS 3 and CARS submissions and its performance contract; see items 1 through 5 above for further information.

If you have any questions about this guidance, please contact Joel Rothenberg at joel.rothenberg@dbhds.virginia.gov or (804)786-6089 or me at paul.gilding@dbhds.virginia.gov or (804) 786-4982. Thanks. Paul Gilding